

February 19, 2002

Mayor Wesely and City Council City of Lincoln City County Building Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Kong Liquor Inc., d.b.a. Kong Liquor, 1401 North 56th requesting a class D liquor license for this location.

Michael Budzinski, current owner has divided the ownership of this business with his brother David Budzinski. They request that David Budzinski be approved as the manager of this liquor license.

Background information on David Budzinski is as follows:

David Budzinski was born in Loup City, Nebraska. He served in the United States Armed Forces 1966 – 1997 receiving an honorable discharge. He attended the University of Nebraska graduating in 1996.

David Budzinski has been employed at Kong Liquor since 2000.

Background information on Michael Budzinski will be omitted, as he is the current approved manager.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

12 Llas





ADDRESS 1401 W 567# PHONE 464-5666 TYPE OF INVESTIGATION: PURCHASE UPGRADE EXPANSION NEW OWNER MANAGER OTHER TYPE OF BUSINESS OF - 5A/C CLASS: A B C B I J K CATERING OTHER OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL PURCHASE PRICE PROPERTY EQUIPMENT VALUE AMOUNT FINANCED PAID SOURCE COLLATERAL W/A COSIGNER(S) LEASE AGREEMENT SAC 1888 EST INCOME % FOOD W/A % LIQUOR 100
TYPE OF BUSINESS OFF - SA/C CLASS: A B C D I J K CATERING OTHER OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL PURCHASE PRICE PROPERTY EQUIPMENT VALUE AMOUNT FINANCED PAID SOURCE COLLATERAL A/A COSIGNER(S) LEASE AGREEMENT SAC 1888
OWNER MANAGER OTHER TYPE OF BUSINESS OFF - SA/E CLASS: A B C D I J K CATERING OTHER OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL PURCHASE PRICE PROPERTY EQUIPMENT VALUE AMOUNT FINANCED PAID SOURCE COLLATERAL A/A COSIGNER(S) LEASE AGREEMENT SAR 1888
CLASS: A B C D I J K CATERING OTHER OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL PURCHASE PRICE PROPERTY EQUIPMENT VALUE AMOUNT FINANCED PAID SOURCE COLLATERAL N/A COSIGNER(S) LEASE AGREEMENT 5.4 1888
CLASS: A B C D I J K CATERING OTHER OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL PURCHASE PRICE PROPERTY EQUIPMENT VALUE AMOUNT FINANCED PAID SOURCE COLLATERAL N/A COSIGNER(S) LEASE AGREEMENT 5-1888
OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL PURCHASE PRICEPROPERTY EQUIPMENT VALUE AMOUNT FINANCED PAIDSOURCE COLLATERAL/ / GCOSIGNER(S) LEASE AGREEMENT S/ 888
PURCHASE PRICEPROPERTY EQUIPMENT VALUE AMOUNT FINANCED PAID SOURCE COLLATERAL//GCOSIGNER(S) LEASE AGREEMENT 5.72 1888
AMOUNT FINANCED PAID SOURCE COLLATERAL A / A COSIGNER(S) LEASE AGREEMENT 5.42 1888
COLLATERAL N/A COSIGNER(S) LEASE AGREEMENT 5 1888
LEASE AGREEMENT 5.72 1888
EST INCOME %FOOD N/R %LIQUOR 100
COMMERCIAL INDUSTRIAL RESIDENTIAL
TRAFFIC MODERATE PARKING Off-STREET
READY FOR OPERATION: YES NO, EST DATE
FOOD SERVICE # OF EMPLOYEES F/T P/T S
NONO
EST SEATING N/A EST # DAILY CUSTOMERS 150
HOURS OF OPERATION SUN 12 AM- 10pm M-ThUR GAM-12:00 55 9
TO THE TANK

Liquor License Investigation
Business (DBA) Kong Liquol
Manager Owner Other
Name: DAvid Budz. NSKI
US Citizen? Yes No
Has applicant ever been cited for liquor law violations? No Yes Explain
Does applicant have an interest in another liquor license? No Yes Explain Corners Ker Bottle
Is spouse qualified to hold a license? Yes No N/A
How is applicant if not an owner to be paid? Salary Hourly
How many hours will applicant be at the establishment?
Any other employment No Yes, explain
Any previous experience with a liquor license? Yes No
Any criminal convictions ? No Yes Comments
Is applicant a property owner in Lincoln? Yes No
Is applicant involved in any civil litigation? No Yes Comments

() References

Interview Date 2 / 19 / 02

(1) Photo

Comments

(L) Records Check

3/14/02 & 3/29/02 JLN D54552

STATE OF NEBRASKA

Russ

Ser dete 2-25-02 P.H. 3-11-02

NEBRASKA LIQUOR CONTROL COMMISSION

Forrest D. Chapman Executive Director

P.O. Box 95046

301 Centennial Mall South, 5th Floor



Mike Johanns Governor City Clerk County/City Bldg 555 S 10th Lincoln NE 68508 Lincoln. Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2571
TRS USER 800 833-7352 (TTY)

Aba Kong Liquor
1401 No. 56, #105, 106

Class D A2-016613

February 12, 2002

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS: AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees:
- Physical possession of the license;
- Effective date on the license.

Will d. Nelson

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Licensing Division

Enclosures
Rhonda R. Flower
Commissioner

Bob Logsdon Chairman

R.L. (Dick) Coyne Commissioner

An Equal Opportunity Affirmative Action Employer

FORM 35-4001 REV. 12 99

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046

http://www.nol.org/home/NLCC/

Phone: (402) 471-2571 Fax: (402) 471-2814

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4, Commission checklist, form 4251 5. Fingerprint cards and

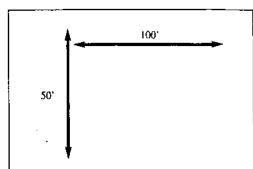
- 143 Te processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or printed clearly. 7. Submit in Triplicate

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR FACH

CLASS OF LICENSE FOR WHICH.	APPLICATION IS M					
Class of License		Registration	License	Corporate		
(Check applicable class)		Fee	Fees	Surety Bond		
A Beer, On Sale Only - Inside Corporate Limi	ts	\$45.00	Collected at Local Level	exempt		
F Beer, On Sale Only - Outside Corporate Lin		\$45.00	Collected at Local Level	exempt		
B Beer, Off Sale Only - Indicate Inside or Out	side Corporate Limits	\$45.00	Collected at Local Level	exempt		
J Wine, Beer, On Sale Only - Inside Corporat	e Limits	\$45.00	Collected at Local Level	exempt		
I Spirits. Wine. Beer, On Sale Only - Inside C	orporate Limits	\$45.00	Collected at Local Level	exempt		
Z D Spirits, Wine, Beer, Off Sale Only - Inside (\$45.00	\$150.00	exempt		
D1 Spirits, Wine, Beer, Off Sale only - within	•					
extraterritorial zoning jurisdiction	1	\$45.00	\$150.00	exempt		
C Spirits. Wine. Beer On & Off Sale - Inside O	Corporate Limits	\$45.00	Collected at Local Level	exempt		
M Bottle Club (Spirits, Wine, Beer, on Sale)		\$45.00	Coilected at Local Level	exempt		
H Nonprofit Corporation		\$45.00	Collected at Local Level	exempt		
K Wine Only, Off Sale		\$45.00	Collected at Local Level	exempt		
O Boat		\$45.00	\$ 50.00	exempt		
V Manufacturer of Beer, Wine & Distilled Spir	rits	\$45.00	Varies \$100 to \$1,000	\$10.000 min.		
X Wholesale Liquor	***	\$45.00	\$500.00	\$ 5.000 mm.		
W Wholesale Beer		\$45.00	\$250.00	\$ 5.000 min.		
Y Farm Winery		\$45.00	\$250.00	\$ 1,000 min.		
L Craft Brewery (Brew Pub)		\$45.00	\$250.00	\$ 1.000 min.		
TYPE OF APPLICATION	CORPOR		Y BOND INFORMATIO			
1= Individual License requires Form 1 to be attached. 2= Partnership License requires Form 2 to be attached. 3= Corporate License requires Form 3 and 4 and Manager Application be attached.	Start Date Month/Day	/Year	Bond Number			
SECTION A - LOCATION IN	NFORMATION – Mu	st be comple	ted by all applicants			
Trade Name (name of business)	Te	lephone Num	ber at premise to be license	d		
Kong Lquer, Inc dea Kong lig	yor 43	2-464-	-			
1) Street Address of Proposed licensed premise	2) Mailing Ad	2) Mailing Address for receipt of				
1401 N.56th Suite 105 +		trol Commiss	ion mailings			
Suite 10 6 July 108 V	S*	me.				
City County Zip Cod	e City		County Z	ip Code		
lincoln LANCASTER EXSET						
				FORM SS-4010		

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



SECTION B OTHER INFORMA	TION	REQUIR	RED
	Yes	No	Explanation/Comments
READ CAREFULLY. Answer completely and accurately. Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means my charge alleging a felony or misdemeanor or violation of a federal or state aw; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.		V	

	Yes	No	Explanation/Comments
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).		V	Hilleroy own Kong Ligeor. Class D +40814
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.		V	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.			Pinnicice le Bank him colnillebrase
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		V.	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		v	
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		~	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.			
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.		~	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	Co.	0 IN- 00/200	SKON VOMMIL Michael & David COMEN perphone call Ln 65 505 0/2/04 JUN
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	Kar DK 1350 LW	75 160 10390 0 10-4, 7621	SKOV VIANCE Michael + David corner perphone call co
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.	Ō	1 -	J. Budzinski So hours (week
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	3085	245 PAIT ~c. (?=1	full time (a) Kongs Mzyecri will toke is couris May. 2002
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).	Lea	4269	piration data: 4/30/03 2002 (Changing to alem Corporation - Bring A Greener of Change
14. When do you intend to open for business?	D)A	۲ ۱۰	corporation - bring

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
11, chazi (sanora) Bubzinski	(५०५	2002	1400 ZAChery CI
a a	1969	1994	7101 willow
Unio J. Budzinski	2000	2002	Fix beech for Are
71	1997	2000	Roman / Coratia
% Vi	1094_	1997	IEI PASO TX
,	1791	1994	Frankfust, 65

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse: if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

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h	ere	here		
S	ubscribed in my presence and sworn to be	efore me this <u> </u>	February 2000	2
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produce the alternate format.

lotary Public Signature

P-RM 35-4010 Rev. 7 01

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

Return to:

Nebraska Liquor Control Commission, PO Box 95046

301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: http://www.nol.org/home/NLCC/

RECEIVED

FEB 1 1 2002

L	QUOR L	ICENSE INFOR	MATIC)N	CONTRO	ASKA UC L COMM)UOH
NAME OF LICENSED CORPORATION				CLAS	SS & LICEN		
Kong Liquoriane					D-		
TRADE NAME OF LICENSED PREMISE				_			
Kong liauor							
STREET ADDRESS OF LICENSED PREMISE C	ITY		COUNT	Ϋ́		ZI	P CODE
1401 N 56 & Sucte 105.	Linc	000	L	400A	1215m	Į į	3504
On behalf of the corporation. I designate this individual	as corporate	e manager.					
Signature of Corporate President/	CEO:	mare 1	ىكى €ر	<u> </u>	Pros		•
APPLICANT I	NFORM	AATION (MU	ST BE	21 OR	OVER)		
NAME (LAST, FIRST, MIDDLE, MAIDEN)	SEX	SOCIAL SECUE	ITY NU	MBER	DATE OF E	BIRTH	PLACE OF BIRTH
Budziuski, David	F (M)						Lough City , NE
HOME STREET ADDRESS		CITY	Ċ	OUNTY		STATE	ZIP CODE
8050 Leighton Aux		Lincoln		LANC	aster	Nia	68507
HOME TELEPHONE NUMBER 42 325 - C766		S TELEPHONE N			DRIVER	S LICENS	E NUMBER & STATE 人后/
SPOUSE'S INFORM				D INDI	CATE NO	ONE)	
FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)		SOCIA	L SECUE	RITY NUN	/IBER	DRIVERS	LICENSE NUMBER
NA Not Married	_					& STATE	
DATE OF BIRTH: per phone c	all	PLACE	OF BIR	TH:	,		
		od JEN .					<u>-</u>
1. READ CAREFULLY – Answer completely ar Has anyone who is a party to this application or t charge means any charge alleging a felony or miss resolution. List the nature of the charge, where the charges pending at the time of this application. If	/ / nd accurate heir spous demeanor c charge oo	ely. e, <u>ever</u> been convi violation of a fede courred and the ye	ral or st ar and n	ate law; on	or a violatio the convicti	n of a loc: on or plea	al law, ordinance or . Also list any

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

 \square YES

ĭ NO

3. Have yo	u or your spo	ouse ever made a compromi	se settlem	ent for vie	olation o	f such laws?			
□ YES	⋉ NO			······································				<u>-</u> -	
•	_	r, have all the qualifications Act (§53-131.01)	required	by any pe	rson enti	itled to hold a Nebraska Li	quor Lic	ense?	
🔀 YES	□ NO								
5. Have vo	u filed finger	print cards and PROPER F	EES (if a	check mad	de out to	the NF State Patrol), with	this apr	lication?	
'≯ YES	□ NO	print turds and a No. 2					upp		
	LIST PRIN	CIPAL RESIDENCE FOI	R PAST 1	0 YEARS	S, APPL	ICANT AND SPOUSE M	IUST C	OMPLETE	
APPLICANT	CITY & STATI	E	FROM	EAR TO	SPOUSE	CITY & STATE		FROM	EAR TO
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Bosin	1 Cross	fice	1997	2000		Nill .			
EI	7 982, TX	((US Army)	1774	1797		<u> </u>			
Front	Rut. C	CE (US Army)	1771	1974					<u>L</u>
			YERS – I	LIST LAS	T TWO	EMPLOYERS		-	
FROM	EAR TO	NAME OF EMPLOYER				NAME OF SUPERVISOR		TELEPHONE N	UMBER
,200 C	2002	Kmg Ly	1438				- 1	452-466	-3336
1997	2000	MPRI				GEN Sewal	<u>'/ </u>	Clark	
PI	ERSONAL C	DATH AND CONSENT OF	F INVES	TIGATIO	N – MU	IST BE SIGNED BY API	LICAN	NT & SPOUS	E
STATE OF	NEBRASK.	A)) SS)			•				
application, tha	it said application	first duly sworn upon oath, deposes on has been read and that the cont all be deemed guilty of perjury and	ents thereof	and all stat	ements co	ntained therein are true. If any fa	ilse statem	ient is made in a	
(State and Fede the Nebraska I	eral), and bank of iquor Control C	eby consents to an investigation of or lending institution records, and s commission and any other individu n affidavit may be attached howe	aid applicar al disclosin	nt and spous ng or releasin	e waive an ng said int	y rights or causes of action that s ormation to the Nebraska Liquor	aid applies	ant or spouse ma	iy have again:
	ed understand at n is incomplete	nd acknowledge that any license i and inaccurate.	ssued, base	d on the inf	ormation s	submitted in this application. is s	arbject to	cancellation if th	ne informatio
		A-1							
	1	1342							
, -	s	ignature of Applicant				Signature of Spou	se (if appl	licable)	
Subscribed in a	- All	sworn to before me this	-			d in my presence and sworn to be		his	
ž	No	otary Signature & Seat NERAL NO	TARY-State of	Nebraska WELL		Notary Signa	ture & Se	al	
1	,	MATT My Comm	Fxp. Dec 25	2002					FORM 35-401

ORM 35-4013 REV 8/01 PAGE 2

FORM 35-4183 Page 1 REV 02/01

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
 - 3) Information regarding spouses must be completed

RECEIVED

NEBRASKA LIQUOA CONTROL COMMISSION

Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation	Articles of Incorpora	lion	Total	Number of Shar	Total Number of Shares (if corporation)
Kong Gguov. Anc.				000 61	C
Corporate Street Address (1) 1401 No 5674 Sout, 105 (1)	N 100	Mailing address for receipt of Liquor Control Commission Mailings	ceipt of nission Mailings		Corporate Telephone Number りなっ 4 ピチーSも1 G
City Vivicous	County LM VICA STR	1 51 R	State Ne Gizaska	45K#	Zip Code (
Name of Registered Agent Name of Registered Agent	Bud zinski	Name of Proposed Manager	Proposed Manager DAUT & JOSEPH	Hdasi	Bud zinski
IN THIS SECTIO	IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER	OF THE CHIEF B	XECUTIVE OFFI	CER	
Name Michael Jounes B	Buch tinski	Title Press, dont	dont	Date of Birth	Social Security Number
Home Address (1) 7900 7 ACVIAV 1	1 Circle	16			State Ne bions K.A.
City Line W.		State Zip	Zip Code UK507	Iome Telephone Number V O Z V U G	vine Telephone Number

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PRINCIPLE OFFICERS, DIRECTO	DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES	BERS AND SPOI	1SES		
ers. Directors. Members and Spouses. Give Last Nai	Social Security Number	Date of Birth	Title	Number of Shares/ %	
NAME Budanski Michael James	-		President/Trees	50%	5000
Spouse Name BUDZINSKI SANDYOL DORK-		-		۵	
NAME PRINCIPLIE DAVID JOSOPH			V. Pres Sec	20%	250025
Spouse Name Africe Not Morlise	- per phan c	all w	David		
NAME			0/12/02		
Spouse Name					
NAME					
Spouse Name					
NAME					
Spouse Name					·
NAME					
Spouse Name					······································

(If Necessary, Continue on Separate Sheet)

## Corporation/LLC Application for License - Form 3 Nebraska Liquor Control Commission

Is this Corporation/LLC controlled by another Corporation? 

YES X NO

Name of Control Corporation

Kong Liquor Inc.

as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation owned

Please indicate below your corporate tax year with the IRS

Starting Date: 01-01:02 Ending Date: 12-31-02

STATE OF ALMS KG

COUNTY

SS.

COUNTY

COUNTY

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COUNTY

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

By W. M. A SOLL PRESIDENT/MEMBER SECRETARY/MEMBER

FORM 35-4183 Page 3 REV 02/01